PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Α	Application or Docket Number 10/574,665			ing Date 13/2007	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL	ENTITY	OR		HER THAN ALL ENTITY	
FOR			NUMBER FI	MBER FILED NUI		MBER EXTRA		RATE (\$)	FEE (\$)	П	RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A	N/A		N/A		N/A]	N/A		
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A		N/	N/A		N/A			N/A		
EXAMINATION FEE (37 CFR 1.16(a), (p), or (q))			N/A		N/	'A	П	N/A			N/A		
	TAL CLAIMS CFR 1.16(i))		mi	minus 20 = *			П	x \$ =		OR	x s =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))			m	minus 3 = *			П	x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE	If the specification and drawing sheets of paper, the application is \$250 (\$125 for small entity) additional 50 sheets or fraction 35 U.S.C. 41(a)(1)(G) and 37 (e fee due ech reof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))							П]			
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL]	TOTAL		
	APP	OED - PAR (Column 2						ER THAN ALL ENTITY					
AMENDMENT	09/10/2010	CLAIMS REMAININ AFTER AMENDME		HIGHEST NUMBER PREVIOUSI PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
Ĭ	Total (37 CFR 1.16(i))	· 23	Minus	→ 20	=	3	1	x \$ =		OR	X \$52=	156	
z	Independent (37 CFR 1.16(h))	• 2	Minus	***3	=	0	П	x \$ =		OR	X \$220=	0	
M	Application Size Fee (37 CFR 1.16(s))												
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						1			OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	156	
(Column 1) (Column 2) (Column 3)													
L		CLAIMS REMAINII AFTER AMENDME	VG	HIGHEST NUMBER PREVIOUS PAID FOR	R F SLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
Z.	Total (37 CFR 1,16(i))		Minus	**	=		П	x \$ =		OR	x \$ =		
M	Independent (37 CFR 1,16(h))	٠	Minus	***			1	x \$ =		OR	x s =		
AMENDMENT	Application Size Fee (37 CFR 1.16(s))									1			
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
_								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** 16	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.												

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